## City of Leesburg Human Resources Department – SEASONAL/TEMP EMPLOYMENT APPLICATION

osition Applying	For		Бера	ii tiiitii					
		First Name			SN		/		
lome Address									
lity		_State		Zip Co	de _		Home #_		
low long have you	lived at your pre	esent addre	ess?						
revious Address _					Ho	w lo	ng did you live h	ere?	
- delatives working t									
n case of emergency notify		Name	Relationship			Telephone Number			
			EDUCAT	TON.					
			EDUCAT	1	RCI				
SCHOOL	NAME LOCATI		EDUCAT COURSE OF STUDY	CIF		AR	DID YOU GRADUATE?		DEGREE O
SCHOOL Elementary			COURSE	CIF LAST	YE	AR TED			
Elementary			COURSE	CIF LAST COMF	YEPLE	EAR TED 8			
			COURSE	CIF LAST COMF	7 3	AR TED 8	GRADUATE?		
Elementary .			COURSE	CIF LAST COMF 5 6	7 3	8 4 4	GRADUATE?		

WORK HISTORY : Please list ALL employment and volunteer experience including temporary and part-time. (Please attach Resume or additional Job History.)

NAME & ADDRESS OF COMPANY	DATES OF EMPLOYMENT	DESCRIBE THE WORK YOU DID	LAST SALARY	REASON FOR LEAVING
Name	From:			
Address				
	То:			
Phone with area code				
NAME & ADDRESS OF COMPANY	DATES OF EMPLOYMENT	DESCRIBE THE WORK YOU DID	LAST SALARY	REASON FOR LEAVING
Name	From:			
Address				
	То:			
Phone with area code				
PERMISSION FOR JOB I, the undersigned Applica in connection with my ap which may contain public driving record, education, experience along with rear requesting information from I hereby authorize without above-mentioned reports at the credit reporting agency.	BACKGROUND INVE	•	FOR CONSULT AT THE PROPERTY OF	y employment background tigative consumer reports or credit, criminal records, These reports will include a City of Leesburg will be activities.  This the right to make a request of the information in its files
Print your name:				
Street Address:				
City:		State:	_ Zip:	
<b>Social Security Number</b>	<b>:</b>	Date of Birth: (Month)	(Day)	(Year)
<b>Drivers License - State:</b>	Number: _	Rac	e:	Gender
Applicant's Signature		Date Signed		
Witness Signature		Printed Witness Name		